

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

ORRINPAC

ADDRESS (number and street)

175 S. WEST TEMPLE, SUITE 650

☐Check if different
than previously
reported. (ACC)

SALT LAKE CITY

UT

84101

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00235572

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

03

01

2008

through

03

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

STANLEY R. DE WAAL

Signature of Treasurer

Electronically Filed by STANLEY R. DE WAAL

Date

04

18

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
ORRINPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		200304.06
(b) Cash on Hand at Beginning of Reporting Period	150048.06	
(c) Total Receipts (from Line 19)	32625.17	74895.02
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	182673.23	275199.08
7. Total Disbursements (from Line 31)	71425.26	163951.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	111247.97	111247.97
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ORRINPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7750.00	30250.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	7750.00	30250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	24500.00	43000.00
(c) Other Political Committees (such as PACs)	32250.00	73250.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	375.17	1645.02
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	32625.17	74895.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	32625.17	74895.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	11725.26	47151.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	11725.26	47151.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	56000.00	111000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	3700.00	5800.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	71425.26	163951.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71425.26	163951.11

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	32250.00	73250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32250.00	73250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11725.26	47151.11
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11725.26	47151.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)
AGSH & F CIVIC ACTION COMMITTEE

Mailing Address AKIN GUMP STRAUSS HAUER & FELD LLP
1333 NEW HAMPSHIRE AVE, NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C C00104901

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 3 / 2 0 0 8

Transaction ID: 80307.C1934

Amount of Each Receipt this Period

750.00

Receipt

B.

Full Name (Last, First, Middle Initial)
ALSTON & BIRD PAC

Mailing Address 601 PENNSYLVANIA AVE, NW
NORTH BLDG, 10TH FLR

City State Zip Code
WASHINGTON DC 20004-2601

FEC ID number of contributing
federal political committee.

C C00395723

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 3 / 2 0 0 8

Transaction ID: 80307.C1933

Amount of Each Receipt this Period

2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
DICKSTEIN SHAPIRO LLP PAC

Mailing Address 1825 EYE ST, NW

City State Zip Code
WASHINGTON DC 20006-5403

FEC ID number of contributing
federal political committee.

C C00110197

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1941

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

GIPAC

Mailing Address P. O. BOX 16515

City

ALEXANDRIA

State

VA

Zip Code

22302

FEC ID number of contributing
federal political committee.

C C00354571

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 3 / 2 0 0 8

Transaction ID: 80307.C1932

Amount of Each Receipt this Period

1500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

HEMOCARE AND HOSPICE PAC

Mailing Address 513 C ST, NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C C00431981

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1946

Amount of Each Receipt this Period

1500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

MERCK PAC

Mailing Address 601 PENNSYLVANIA AVE, NW
NORTH BLDG, STE 1200

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00097485

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1943

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

NOVARTIS PAC

Mailing Address 701 PENNSYLVANIA AVE, NW, STE 725

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00033969

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1951

Amount of Each Receipt this Period

2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

NUCOR CORPORATION PAC

Mailing Address 2100 REXFORD RD

City

CHARLOTTE

State

NC

Zip Code

28211

FEC ID number of contributing
federal political committee.

C C00379628

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 3 / 2 0 0 8

Transaction ID: 80307.C1936

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

TEVA PAC

Mailing Address 1090 HORSHAM RD
P. O. BOX 1090

City

NORTH WALES

State

PA

Zip Code

19454-0090

FEC ID number of contributing
federal political committee.

C C00434811

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1947

Amount of Each Receipt this Period

750.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)
THE GLAXOSMITHKLINE PAC

Mailing Address FIVE MOORE DR
P. O. BOX 13398

City State Zip Code
DURHAM NC 27709

FEC ID number of contributing
federal political committee.

C C00199703

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1950

Amount of Each Receipt this Period

2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP FUND EFFECT GOVT

Mailing Address 600 THIRTEENTH ST, NW, STE 340

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00010470

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1944

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
USTEAM PAC

Mailing Address 6 HIGH RIDGE PARK, BLDG A

City State Zip Code
STAMFORD CT 06905-1323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1940

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

VANGUARD COMMITTEE FOR RESP. GOVT

Mailing Address 400 DEVON PARK DR

City

WAYNE

State

PA

Zip Code

19087-1816

FEC ID number of contributing
federal political committee.

C C00410266

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1942

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

WELLPOINT, INC. WELLPAC

Mailing Address 120 MONUMENT CIR

City

INDIANAPOLIS

State

IN

Zip Code

46204-4903

FEC ID number of contributing
federal political committee.

C C00197228

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1952

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

24500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

ANDREW BOPP

Mailing Address 2133 TUNLAW RD, NW

City

WASHINGTON

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.

C

Name of Employer
BOSTROM CORPORATION

Occupation

GOVT RELATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Transaction ID: 80307.C1930

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

SMITH W. DAVIS

Mailing Address 1333 NEW HAMPSHIRE AVE, NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Akin, Gump, Strauss, Hauer

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Transaction ID: 80307.C1935

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

RICHARD A. DEEM

Mailing Address 1025 N. DANIEL ST

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN MEDICAL ASSN

Occupation

SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: 80417.C1945

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

ROBERT J. DOLE

Mailing Address 700 NEW HAMPSHIRE AVE, NW

City

WASHINGTON

State

DC

Zip Code

20037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alston & Bird LLP

Occupation

SPECIAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 3 / 2 0 0 8

Transaction ID: 80307.C1931

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

BRYCE L. HARLOW

Mailing Address 1812 SOLITAIRE LN

City

MC LEAN

State

VA

Zip Code

22101-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Timmons & Company

Occupation

PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1949

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

STACEY HUGHES

Mailing Address 314 N. GARFIELD ST

City

ARLINGTON

State

VA

Zip Code

22201-1231

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE NICKLES GROUP

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80417.C1948

Amount of Each Receipt this Period

2000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

David T. Lisonbee

Mailing Address 304 EAST 1600 NORTH

City

OREM

State

UT

Zip Code

84057

FEC ID number of contributing
federal political committee.

C

Name of Employer
4 LIFE RESEARCH

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 8

Transaction ID: 80326.C1938

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

J. J. WANG

Mailing Address 168 E. CENTER ST

City

MOAB

State

UT

Zip Code

84532-2430

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 8

Transaction ID: 80326.C1939

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

7750.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 21

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

ZIONS BANK

Mailing Address 310 SOUTH MAIN ST

City

SALT LAKE CITY

State

UT

Zip Code

84101-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1645.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	8

Transaction ID: 80417.C1961

Amount of Each Receipt this Period

375.17

Interest Received

SUBTOTAL of Receipts This Page (optional)

375.17

TOTAL This Period (last page this line number only)

375.17

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ORRINPAC

A. Full Name (Last, First, Middle Initial) CBIZ FPG, LLC	Transaction ID: 80417.E1767 Date of Disbursement																				
Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	8												
City SALT LAKE CITY State UT Zip Code 84101- Purpose of Disbursement Accounting fees Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1</td><td>8</td><td>7</td><td>8</td><td>0</td><td>4</td> </tr> </table>	1	8	7	8	0	4														
1	8	7	8	0	4																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type ACCOUNTING FEES																				
B. Full Name (Last, First, Middle Initial) NATIONAL POLITICAL ASSOCIATES	Transaction ID: 80417.E1777 Date of Disbursement																				
Mailing Address P.O. BOX 2204	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	1		2	0	0	8												
City WASHINGTON State DC Zip Code 20013- Purpose of Disbursement Pac consulting Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>8</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td> </tr> </table>	8	0	0	0	0	0														
8	0	0	0	0	0																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type PAC CONSULTING																				
C. Full Name (Last, First, Middle Initial) North Capitol Street Enterprises	Transaction ID: 80417.E1778 Date of Disbursement																				
Mailing Address 400 North Capitol Street, NW Suite 585	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	8												
City WASHINGTON State DC Zip Code 20001- Purpose of Disbursement Office rent and phone Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>8</td><td>3</td><td>4</td><td>0</td><td>5</td> </tr> </table>	8	3	4	0	5															
8	3	4	0	5																	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type OFFICE RENT AND PHONE																				

SUBTOTAL of Disbursements This Page (optional)

10712.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
NORTHCIRCLE, LLC

Mailing Address 552 WEST 925 NORTH CIRCLE

City State Zip Code
CENTERVILLE UT 84014-

Purpose of Disbursement
Pac consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80417.E1779

Date of Disbursement

/ /

Amount of Each Disbursement this Period

225.00

PAC CONSULTING

B.

Full Name (Last, First, Middle Initial)
ZIONS BANK

Mailing Address 310 SOUTH MAIN ST

City State Zip Code
SALT LAKE CITY UT 84101-

Purpose of Disbursement
Corporate taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80417.E1786

Date of Disbursement

/ /

Amount of Each Disbursement this Period

483.00

CORPORATE TAXES

C.

Full Name (Last, First, Middle Initial)
ZIONS BANK

Mailing Address 310 SOUTH MAIN ST

City State Zip Code
SALT LAKE CITY UT 84101-

Purpose of Disbursement
Service fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80417.E1787

Date of Disbursement

/ /

Amount of Each Disbursement this Period

205.17

SERVICE FEE

SUBTOTAL of Disbursements This Page (optional)

913.17

TOTAL This Period (last page this line number only)

11625.26

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 21

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 ORRINPAC

A. Full Name (Last, First, Middle Initial)
 DUNCAN HUNTER FOR CONGRESS

Mailing Address 9340 FUERTE DRIVE, #302

City LA MESA State CA Zip Code 91941-

Purpose of Disbursement
 CONTRIBUTION TO PRIMARY

Candidate Name
 DUNCAN D HUNTER

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 52

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80417.E1769

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

CONTRIBUTION TO PRIMARY

B. Full Name (Last, First, Middle Initial)
 HEATHER WILSON FOR CONGRESS

Mailing Address P.O. BOX 14070

City ALBUQUERQUE State NM Zip Code 87191-9963

Purpose of Disbursement
 CONTRIBUTION TO PRIMARY

Candidate Name
 HEATHER A. WILSON

Office Sought: ☒ House
☐ Senate
☐ President

State: NM District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80417.E1770

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

C. Full Name (Last, First, Middle Initial)
 MICHAEL JOHANNIS FOR SENATE

Mailing Address ATTN: DEAN DENNHARDT
 P. O. BOX 80297

City LINCOLN State NE Zip Code 68501-

Purpose of Disbursement
 CONTRIBUTION TO GENERAL

Candidate Name
 MICHAEL O JOHANNIS

Office Sought: ☐ House
☒ Senate
☐ President

State: NE District: 00

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 80417.E1776

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO GENERAL

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 21

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 ORRINPAC

A. Full Name (Last, First, Middle Initial)
 JOHN KENNEDY FOR US SENATE

Mailing Address P. O. BOX 14861

City State Zip Code
 BATON ROUGE LA 70898-

Purpose of Disbursement
 CONTRIBUTION TO PRIMARY

Candidate Name
 JOHN NEELY KENNEDY

Office Sought: ☐ House
☒ Senate
☐ President

State: LA District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80417.E1772

Date of Disbursement

M M / D D / Y Y Y Y
 03 06 2008

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

B. Full Name (Last, First, Middle Initial)
 JOHN MCCAIN 2008 INC

Mailing Address P. O. BOX 16118

City State Zip Code
 ARLINGTON VA 22215-

Purpose of Disbursement
 CONTRIBUTION TO PRIMARY

Candidate Name
 JOHN S MCCAIN

Office Sought: ☐ House
☐ Senate
☒ President

State: District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80417.E1773

Date of Disbursement

M M / D D / Y Y Y Y
 03 06 2008

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

C. Full Name (Last, First, Middle Initial)
 JOHN MCCAIN 2008 INC

Mailing Address P. O. BOX 16118

City State Zip Code
 ARLINGTON VA 22215-

Purpose of Disbursement
 CONTRIBUTION TO GENERAL

Candidate Name
 JOHN S MCCAIN

Office Sought: ☐ House
☐ Senate
☒ President

State: District: 00

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 80417.E1774

Date of Disbursement

M M / D D / Y Y Y Y
 03 06 2008

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO GENERAL

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ORRINPAC**A.**Full Name (Last, First, Middle Initial)
OGONOWSKI FOR SENATE

Mailing Address 110 PECHAM ROAD

City DRACUT State MA Zip Code 01826-

Purpose of Disbursement
CONTRIBUTION TO GENERALCandidate Name
KATHLEEN OGONOWSKIOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 00

Transaction ID: 80417.E1781

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	8

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO GENERAL

B.Full Name (Last, First, Middle Initial)
OGONOWSKI FOR SENATE

Mailing Address 110 PECHAM ROAD

City DRACUT State MA Zip Code 01826-

Purpose of Disbursement
CONTRIBUTION TO PRIMARYCandidate Name
KATHLEEN OGONOWSKIOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 00

Transaction ID: 80417.E1780

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	8

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

C.Full Name (Last, First, Middle Initial)
JIM RISCH FOR SENATE

Mailing Address 407 W JEFFERSON STREET

City BOISE State ID Zip Code 83702-

Purpose of Disbursement
CONTRIBUTION TO GENERALCandidate Name
JAMES E RISCHOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: ID District: 00

Transaction ID: 80417.E1771

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	8

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO GENERAL

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 ORRINPAC

A. Full Name (Last, First, Middle Initial)
 BOB SCHAFFER FOR SENATE

Mailing Address 5027 ALDER COURT

City FORT COLLINS State CO Zip Code 80525-

Purpose of Disbursement
 CONTRIBUTION TO GENERAL

Candidate Name
 ROBERT W SCHAFFER

Category/
 Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 00

Transaction ID: 80417.E1765

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO GENERAL

B. Full Name (Last, First, Middle Initial)
 WICKER FOR SENATE

Mailing Address P. O. BOX 64

City JACKSON State MS Zip Code 39205-

Purpose of Disbursement
 CONTRIBUTION TO GENERAL

Candidate Name
 ROGER F. WICKER

Category/
 Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MS District: 00

Transaction ID: 80417.E1785

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO GENERAL

C. Full Name (Last, First, Middle Initial)
 WICKER FOR SENATE

Mailing Address P. O. BOX 64

City JACKSON State MS Zip Code 39205-

Purpose of Disbursement
 CONTRIBUTION TO PRIMARY

Candidate Name
 ROGER F. WICKER

Category/
 Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MS District: 00

Transaction ID: 80417.E1784

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

56000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 ORRINPAC

A. Full Name (Last, First, Middle Initial)
 CACHE COUNTY REPUBLICAN PARTY

Mailing Address 448 N 1000 E.

City State Zip Code
 HYDE PARK UT 84318-

Purpose of Disbursement
 LINCOLN DAY DINNER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80417.E1766

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
 DAVIS COUNTY REPUBLICAN PARTY

Mailing Address 338 SOUTH 850 EAST

City State Zip Code
 CENTERVILLE UT 84014-

Purpose of Disbursement
 LINCOLN DAY DINNER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80417.E1768

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

C. Full Name (Last, First, Middle Initial)
 WASHINGTON COUNTY REPUBLICAN PARTY

Mailing Address 210 N. MALL DR. #19

City State Zip Code
 SAINT GEORGE UT 84790-

Purpose of Disbursement
 LINCOLN DAY DINNER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80417.E1783

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

3500.00